

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000194258

**Entity Name:** E-Z TAX RETURNS LLC

**Current Principal Place of Business:**

888 BISCAYNE BLVD  
APT# 3307  
MIAMI, FL 33132

**Current Mailing Address:**

888 BISCAYNE BLVD  
APT# 3307  
MIAMI, FL 33132 US

**FEI Number:** 81-0702172

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LOPERA, SANDRA  
888 BISCAYNE BLVD  
APT # 3307  
MIAMI FL, FL 33132 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title            PRINCIPAL  
Name            LOPERA, SANDRA  
Address        888 BISCAYNE BLVD  
                  APT# 3307  
City-State-Zip: MIAMI FL 33132

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SANDRA LOPERA

04/05/2023

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date